| PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 8, 2004                                                                                                                                                                                                                                                                                                                                      |                                                |                                           |                       |                                |              |                  |         |                                              | 10/563, 609            |         |                     |                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------|-----------------------|--------------------------------|--------------|------------------|---------|----------------------------------------------|------------------------|---------|---------------------|------------------------|
|                                                                                                                                                                                                                                                                                                                                                                                                              |                                                | CLAIMS A                                  | (Column 1) (Column 2) |                                |              |                  |         | SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY |                        |         |                     |                        |
| U.S. NATIONAL STAGE FEES                                                                                                                                                                                                                                                                                                                                                                                     |                                                |                                           |                       |                                | `            |                  | 7       | RATE                                         | FEE                    |         | RATE                | FEE                    |
| BASIC FEE                                                                                                                                                                                                                                                                                                                                                                                                    |                                                |                                           |                       |                                |              |                  | 1       | BASIC FEE                                    |                        | OR      | BASIC FEE           | 300                    |
| EXAMINATION FEE                                                                                                                                                                                                                                                                                                                                                                                              |                                                |                                           |                       |                                |              |                  | 1       | EXAM. FEE                                    |                        |         | EXAM. FEE           | 200                    |
| SEARCH FEE                                                                                                                                                                                                                                                                                                                                                                                                   |                                                |                                           | !                     |                                |              |                  |         | SEARCH FEE                                   |                        |         | SEARCH FEE          | 400                    |
| FEE FOR EXTRA SPEC. PGS.                                                                                                                                                                                                                                                                                                                                                                                     |                                                |                                           | min                   | us 100 =                       | / 50 =       |                  |         | X \$ 125 =                                   |                        |         | X \$ 250 =          | · · · · · ·            |
| TOTAL CHARGEABLE CLAIMS                                                                                                                                                                                                                                                                                                                                                                                      |                                                |                                           | 15 mi                 | nus 20 =                       | •            |                  |         | X \$ 25 =                                    |                        | OR      | X \$ 50 =           |                        |
| INDEPENDENT CLAIMS                                                                                                                                                                                                                                                                                                                                                                                           |                                                |                                           | 2 "                   | ilnus 3 =                      | *            |                  | 1       | X \$ 100 =                                   |                        | OR      | X \$ 200 =          |                        |
| MULTIPLE DEPENDENT CLAIM PRE                                                                                                                                                                                                                                                                                                                                                                                 |                                                |                                           | ESENT                 |                                |              |                  |         | +\$ 180 =                                    |                        | OR      | + \$ 360 =          |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2                                                                                                                                                                                                                                                                                                                                     |                                                |                                           |                       |                                |              | _                | TOTAL   |                                              | OR                     | TOTAL   | 900                 |                        |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)                                                                                                                                                                                                                                                                                                                                                |                                                |                                           |                       |                                |              | 7                | SMALL E |                                              | OR                     | OTHER T | NTITY .             |                        |
| AMENDMENT A                                                                                                                                                                                                                                                                                                                                                                                                  |                                                | REMAINING<br>AFTER<br>AMENDMENT           |                       | NUM<br>PREVIO<br>PAID          | BER<br>DUSLY | PRESENT<br>EXTRA |         | RATE                                         | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|                                                                                                                                                                                                                                                                                                                                                                                                              | Total                                          | · 15                                      | Minus                 | " 2c                           | 2.           |                  |         | X \$ 25 =                                    |                        | OR      | X \$ 50 =           |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                              | Independent                                    | • 2                                       | Minus                 | <b>"</b> 3                     |              | =                |         | X \$ 100 =                                   |                        | OR      | X \$ 200 =          |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                              | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                           |                       |                                |              |                  |         | + \$ 180 =                                   | :                      | OR      | + \$ 360 =          |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                              |                                                |                                           |                       |                                |              |                  |         | TOTAL ADDIT.                                 | •                      | OR      | TOTAL ADDIT.<br>FFF |                        |
| (Column 1) (Column 2) (Column 3)                                                                                                                                                                                                                                                                                                                                                                             |                                                |                                           |                       |                                |              |                  |         |                                              |                        |         |                     |                        |
| NTB                                                                                                                                                                                                                                                                                                                                                                                                          |                                                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                       | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY | PRESËNT<br>EXTRA |         | RATE                                         | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
| 2                                                                                                                                                                                                                                                                                                                                                                                                            | Total                                          | <b>*</b>                                  | Minus                 | **                             |              | 3                |         | X \$ 25 =                                    |                        | OR      | X \$ 50 =           |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                              | Independent                                    | *                                         | Minus                 | ***                            |              | =                |         | X \$ 100 =                                   | ·                      | OR      | X \$ 200 =          |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                              | FIRST PRES                                     | ENTATION OF M                             | ULTIPLE DEP           | ENDENT (                       | CLAIM        |                  |         | + \$ 180 =                                   |                        | OR      | + \$ 380 =          |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                              |                                                |                                           |                       |                                |              |                  |         | TOTAL ADDIT.<br>FFF                          |                        | OR      | TOTAL ADDIT.<br>FFF |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1. |                                                |                                           |                       |                                |              |                  |         |                                              |                        |         |                     |                        |